### Work Order ID 55007

Page 1

January 5, 2010 12:38:51 PM

Item ID:

D3544-041

Accept

Setup Start

Stop

**Revision ID:** 

Item Name: Clamp

**Start Date:** Required Date: 08/01/2010

05/01/2010

Start Qty: 40.00 Reg'd Qty: 40.00

Cust Item ID:

**Customer:** 

Reference:

Approvals:

Date 10-1-05 Tooling:

Date:

Run

Start



QC:

Date:

SPC (Y/N):

Date:

Stop

10-1-20



Sequence ID/ Work Center ID

Operation Description Set Up/

Draw Number Plan Code

Accept Qty

Reject

Revision Nbr

**Run Hours** 

Rev.

Qty

Reject Number

Stamp

**Draw Nbr** 

D3544

Rev A

100

Small Fab

Small Fab

Memo

Memo

Small Fab

Assemble as per Dwg D3544

0.00

0.00

110

QC

QC5- Inspect part completeness to step on W/O

27 8 10/01/20

Quality Control

Identify as per dwg & Stock Location: 458

0.00

0.00

120

Packaging

Memo

0.00

Packaging

| W/O:    |      |                       | WORK ORDER C    | HANGES   |       |     |                                     |                          |
|---------|------|-----------------------|-----------------|----------|-------|-----|-------------------------------------|--------------------------|
| DATE    | STEP | STEP PROCEDURE CHANGE |                 | Ву       | Date  | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|         |      |                       |                 |          |       |     |                                     |                          |
|         |      |                       |                 |          |       |     |                                     |                          |
|         |      |                       |                 |          |       |     |                                     |                          |
|         |      |                       |                 |          |       |     |                                     |                          |
|         |      |                       |                 |          |       |     |                                     | 1                        |
| Part No |      | PAR #:                | Fault Category: | NCR: Yes | No DO | Λ-  | Date:                               | I                        |

Resolution: \_\_\_\_\_ Disposition: \_\_\_\_\_ QA: N/C Closed: \_\_\_\_ Date: \_\_\_\_\_

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                      |                              |                |           |                       |                          |  |  |
|------|------|----------------------------------|----------------------|------------------------------|----------------|-----------|-----------------------|--------------------------|--|--|
|      |      | Description of NC                |                      | Corrective Action Section B  | Verification   |           |                       |                          |  |  |
| DATE | STEP | Section A                        | Initial<br>Chief Eng | Action Description Chief Eng | Sign &<br>Date | Section C | Approval<br>Chief Eng | Approval<br>QC Inspector |  |  |
|      |      |                                  |                      |                              |                |           |                       |                          |  |  |
|      |      |                                  |                      |                              |                |           |                       |                          |  |  |
|      |      |                                  |                      |                              |                | į         |                       |                          |  |  |
|      |      |                                  |                      |                              |                |           |                       |                          |  |  |
|      |      |                                  |                      |                              |                |           |                       |                          |  |  |
|      |      |                                  |                      |                              |                |           |                       |                          |  |  |
|      |      | 710                              |                      |                              |                |           |                       |                          |  |  |
|      |      |                                  |                      |                              |                |           |                       |                          |  |  |
|      |      |                                  |                      |                              |                |           |                       |                          |  |  |



January 5, 2010 12:38:51 PM

Item ID:

D3544-041

Accept



Setup Start



Revision ID:

Item Name: Clamp

**Start Date:** 05/01/2010 Required Date: 08/01/2010

Start Qty: 40.00 Req'd Qty: 40.00

Cust Item ID:

Customer:

Reference:

Memo

Tooling:

Date:

Start



Approvals:

Process Plan:

Date: \_\_\_\_\_ Date:

SPC (Y/N):

Date:

Stop

Sequence ID/ Work Center ID Operation Description

Set Up/ Run Hours Draw Number Draw Rev.

Plan Code Qty

Reject Accept Qty

Run

Number Stamp

130

QC

QC21- Final Inspection - Work Order Release

0.00

Quality Control

0.00

| W/O: |      | WORK ORDER CH    | HANGES |      | •   |                                     |                          |
|------|------|------------------|--------|------|-----|-------------------------------------|--------------------------|
| DATE | STEP | PROCEDURE CHANGE | Ву     | Date | Qty | Approval<br>Chief Eng /<br>Prod Mgr | Approval<br>QC Inspector |
|      |      |                  |        |      |     |                                     |                          |
|      |      |                  |        |      |     |                                     |                          |
|      |      |                  |        |      |     |                                     |                          |
|      |      |                  |        |      |     |                                     |                          |
|      |      |                  |        |      |     |                                     |                          |
|      |      |                  |        |      |     |                                     |                          |

| Part No: |             | PAR #: | Fault Category: | NCR: Yes No    | DQA:       | Date: |
|----------|-------------|--------|-----------------|----------------|------------|-------|
|          | Resolution: |        | Disposition:    | QA: N/C Closed | i <u>.</u> | Date: |

| NCR: |      | WORK ORDER NON-CONFORMANCE (NCR) |                      |                              |                |                             |                    |                          |  |  |
|------|------|----------------------------------|----------------------|------------------------------|----------------|-----------------------------|--------------------|--------------------------|--|--|
|      |      | Description of NC                |                      | Corrective Action Section B  |                |                             |                    | Ammunual                 |  |  |
| DATE | STEP | STEP Section A                   | Initial<br>Chief Eng | Action Description Chief Eng | Sign &<br>Date | - Verification<br>Section C | Approval Chief Eng | Approval<br>QC Inspector |  |  |
|      |      |                                  |                      |                              |                |                             |                    |                          |  |  |
|      |      |                                  |                      |                              |                |                             |                    |                          |  |  |
|      |      |                                  |                      |                              |                |                             |                    |                          |  |  |
|      |      |                                  |                      |                              |                |                             |                    |                          |  |  |
|      |      |                                  |                      |                              |                |                             |                    |                          |  |  |
|      |      |                                  |                      |                              |                |                             |                    |                          |  |  |
|      |      |                                  |                      |                              |                |                             |                    |                          |  |  |
|      |      |                                  |                      |                              |                |                             |                    |                          |  |  |
|      |      |                                  |                      |                              |                |                             |                    |                          |  |  |
|      |      |                                  |                      |                              |                | 1                           | l .                | ľ                        |  |  |

#### **Picklist Print**

January 5, 2010 12:38:55 PM

Work Order ID: 55007

Parent Item:

D3544-041

Parent Item Name: Clamp



Start Date: 05/01/2010

Required Date: 08/01/2610

**Start Qty: 40.00** 

Required Qty: 40.00

| Com | m | ent | s: |
|-----|---|-----|----|
|     |   |     |    |

| Component | Item | ID/ | R  |
|-----------|------|-----|----|
| Item Name |      |     | It |

Replacement Mfg/ tem ID

Purch

Primary Bem Location Location

Unit of Route Seq ID

Measure Hand

Qty on Remaining Qty Qty To Pick Issued

Date Issued

Status

Page 1

D2182



Manufactured

Manufactured

100

Loc Oty

746.6516 24.6316

Heat Sh

| S TIRBI IIEN | i i i i i | 1121 | 122 | : |
|--------------|-----------|------|-----|---|
| rink         |           |      |     |   |

| Warehouse |
|-----------|
| Location  |

Main Warehouse

ST

21864 26009

3999

Last

746.6516 360.609

311.74 74.3026

100

Each

116

100

16

116.0000 40.0000

D2947



Clamp

Warehouse Location

Main Warehouse

ST

44049 46847 Loc Qty

Loc Code

| W/O:              |      |                                | WORK ORDER CHANGES |                 |                        |                                       |                       |                    |                               |                          |  |
|-------------------|------|--------------------------------|--------------------|-----------------|------------------------|---------------------------------------|-----------------------|--------------------|-------------------------------|--------------------------|--|
| DATE              | STEP | PRO                            | OCEDURE CH         | ANGE            |                        | Ву                                    | Date                  | Qty                | Approval Chief Eng / Prod Mgr | Approval<br>QC Inspector |  |
| ·                 |      |                                |                    |                 |                        |                                       |                       |                    |                               |                          |  |
|                   |      |                                |                    |                 |                        |                                       |                       |                    |                               |                          |  |
| Part No: PAR #: _ |      | PAR #:                         | Fault Car          | NCR             | NCR: Yes No DQA: Date: |                                       |                       |                    |                               |                          |  |
| Resolution:       |      |                                | Disposit           | Disposition: Q/ |                        |                                       | QA: N/C Closed: Date: |                    |                               |                          |  |
| NCR:              |      |                                | WORK ORI           | DER NON-CONFOR  | MANCE                  | (NCR)                                 | l                     |                    |                               |                          |  |
| DATE              | STEP | Description of NC<br>Section A |                    |                 | Section B              | Verification Section C                |                       | Approval Chief Eng | Approval<br>QC Inspector      |                          |  |
|                   |      |                                | •                  |                 |                        |                                       |                       |                    |                               |                          |  |
|                   |      |                                |                    |                 |                        | · · · · · · · · · · · · · · · · · · · |                       |                    |                               |                          |  |
|                   |      |                                |                    |                 |                        |                                       |                       |                    |                               |                          |  |
|                   |      |                                |                    |                 |                        |                                       |                       |                    |                               |                          |  |
|                   |      |                                |                    |                 |                        |                                       |                       |                    |                               |                          |  |
|                   |      |                                |                    |                 |                        |                                       |                       |                    |                               |                          |  |



DESIGN DRAWN BY CB CHECKED

DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA

APPROVED

DRAWING NO. D3544

REV. A SHEET 1 OF 1

DATE

TITLE

SCALE

1:1

06.08.11 DATE REV

**CLAMP** 

DESCRIPTION

Ã 06.08.11 **NEW ISSUE** 

SHOPCCFY

RETURNTO

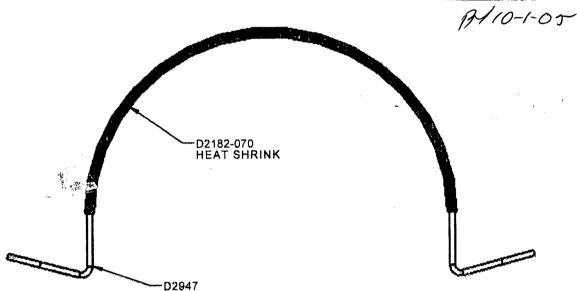
ENGINEERING:

**UNCONTROLLER CONS** 

SUBJECT TO AMENDMENT

SOLION TUOHTIW

WORK ORDER NO. <u>5500</u>フ



D3544-041 CLAMP

06.08-23

T. C.

COPYRIGHT © 2006 BY DART AEROSPACE LTD

THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.

| W/O:        |      | WORK ORDER CHANGES |                      |         |                               |         |                |              |            |                               |                          |
|-------------|------|--------------------|----------------------|---------|-------------------------------|---------|----------------|--------------|------------|-------------------------------|--------------------------|
| DATE STEP   |      | PRO                | PROCEDURE CHANGE     |         |                               |         |                | Date         | Qty        | Approval Chief Eng / Prod Mgr | Approval<br>QC Inspector |
|             |      |                    |                      |         |                               |         |                |              |            |                               |                          |
|             |      |                    |                      |         |                               |         |                |              |            |                               |                          |
|             |      |                    |                      |         |                               |         |                | •••          |            |                               |                          |
|             |      |                    |                      |         |                               |         |                |              |            |                               |                          |
| Part No:    |      | PAR #:             | Fault Ca             | tegory: |                               | NCF     | : Yes          | No <b>DQ</b> | <b>A</b> : | _ Date: _                     |                          |
| Resolution: |      | esolution:         | Disposition:         |         |                               | QA:     | N/C CI         | osed:        |            | Date: _                       |                          |
| NCR:        |      | ,                  | WORK OR              | DER NO  | N-CONFORM                     | IANCE   | (NCR           | )            |            |                               |                          |
| DATE        | STEP | Description of NC  |                      |         |                               | ction B |                | Verific      | cation     | Approval                      | Approval                 |
| DAIL        | SIEF | Section A          | Initial<br>Chief Eng | Ac      | tion Description<br>Chief Eng |         | Sign &<br>Date | Secti        | on C       | Chief Eng                     | QC Inspector             |
|             |      |                    |                      |         |                               |         |                |              |            |                               |                          |
|             |      |                    |                      |         |                               |         |                |              |            |                               |                          |
|             |      |                    |                      |         |                               |         |                |              |            |                               |                          |
|             |      |                    |                      |         |                               |         |                |              |            |                               |                          |
|             |      |                    |                      |         |                               |         |                | į            |            |                               |                          |
|             |      |                    |                      |         |                               |         |                |              |            |                               |                          |
|             |      |                    |                      |         |                               |         |                |              |            |                               |                          |
|             |      |                    |                      |         |                               |         |                |              |            |                               |                          |
| I .         | 1    | 1                  | i .                  | .1      |                               | 1       |                | 1            |            | I                             | 1                        |